

SUBJECT Hazard Analysis Worksheet PLANT NAME ADDRESS		ISSUE DATE		PRODUCT	
		SUPERSEDES		PAGE	
(1) Ingredient/Processing Step	(2) Identify <u>potential</u> food safety hazards introduced, controlled or enhanced ¹ at this step.	(3) Are any <u>potential</u> food-safety hazards reasonably likely to occur?	(4) Justify your decision for column 3	(5) What control measure(s) can be applied to prevent, reduce, or eliminate the food safety hazards?	(6) Is this step a critical Control point? (Yes/No)
	Biological	<input type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> YES
	Physical	<input type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> NO
	Chemical	<input type="checkbox"/> YES <input type="checkbox"/> NO			
	Biological	<input type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> YES
	Physical	<input type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> NO
	Chemical	<input type="checkbox"/> YES <input type="checkbox"/> NO			
<i>Instructions and Example</i> Raw Milk Receiving	² Biological Vegetative Pathogens ³ Physical None ⁴ Chemical Animal drug residues	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Likely to occur based on historical data (Leave Blank) Appendix N Testing in PP #5 Protection from Adulteration	Pasteurization (Leave Blank) (Leave Blank)	<input type="checkbox"/> YES <input checked="" type="checkbox"/> ⁵ NO

Approved By: _____

(Signature)

Date: _____

¹ Do not carry the hazard through subsequent steps.

² If a firm identifies a potential hazard in column 2 and yes is noted in column 3, justification is required in column 4 (This justification normally includes the scientific, regulatory, or historical reasons for the decision) and a control measure is required in column 5.

³ If a firm does not identify a potential hazard in column 2, column 3 will state "no" and columns 4 and 5 will be blank.

⁴ If a firm identifies a potential hazard in column 2 and No is noted in column 3, justification is required in column 4. This justification normally includes Prerequisite Programs or procedures that manage the hazard to ensure that control at this step is not necessary. Column 5 will be left blank.

⁵ Column 6 will be answered yes only if the step in column 1 is a critical control point (the control measure is applied at that step).